

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i> Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA. 22313-1450	Application Number	Not yet assigned 10/562810
	Filing Date	Herewith
	First Named Inventor	MORI
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	05826/LH

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I am the:


☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or Agent of record. **Registration No. 22,974**

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Typed or Printed Name **Leonard Holtz, Reg. No. 22,974**

Signature 

Date **December 29, 2005** Telephone: **(212) 319-4900**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☐ Total of _____ forms are submitted.